Kamm transducer (one 9 mm from end of mouth)

avg insertion 4-5 mm

11/3 ACL, PM

Lip pressure - Annually - higher (10X more than Kamm)

PM Cotinine - major errors - just plain wrong (typing errors). PM model - hard to tell what raw data was. Our statisticians compared 2 studies. Standard errors huge ⇒ bad data. Hard to draw any conclusions.

Butt study - lot of discrepancies ⇒ hidden facts → PM: many comments.

Cross sections - 1 mm
same with humans

Puff freq & volume: whole idea of retained nicotine is not to have to consider P/F, P/V. See earlier PM memo re nic.

Puff volume (2 sec) ⇒ in by using
velocity → flow rate (plotted that way; sounder in dealing with filter efficiency).

F/E doesn't change with P/V; velocity or flow rate changes F/E

Left off 30% dilution graph (50 or 100 cases that would give .8 mg nicotine).

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Solid. analog pattern or same product is reproducible.

Kamm assumes same pattern. ⇒ inconsistencies.

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Source: https://www.industrydocuments.ucsf.edu/docs/xldb0003